




United Behavioral Health

Orientation and Training of Optum Pierce Behavioral Organization Staff			Policy Identifier/Number: AD-12
Annual Review Completed Date: February 2018			
Policy Category: Government – Pierce Regional Support Network	Applicable Lines of Business: Medicaid	Entity/Plan: Optum Pierce Behavioral Health Organization	State: Pierce County, Washington
Approved by: Bea Dixon, Executive Director		Signature: 	

Policy Statement and Purpose

Optum Pierce Behavioral Health Organization (BHO) provides comprehensive orientation and ongoing training to all staff on overall and position-specific clinical and administrative functions and requirements.

To describe the Optum Pierce BHO orientation and continuing education programs for internal staff.

Policy Audience and Applicability

This policy is applicable to the Optum Pierce BHO and benefits administered through the Washington State Department of Social and Health Services (DSHS) current Prepaid Inpatient Health Plan (PIHP).

Policy Definitions

N/A

Policy Provisions

1. In accordance with WAC 388-865, Optum Pierce BHO provides orientation and ongoing training to BHO staff in the skills pertinent to the individual position and the treatment population. Training includes education on age and culturally competent treatment and consultation with consumers, families, and community members.
2. Basic Office Training
 - 2.1. All staff receive basic office training including:
 - 2.1.1. Introduction to the facility;
 - 2.1.2. Employee benefits;
 - 2.1.3. Parking;
 - 2.1.4. Office tour;
 - 2.1.5. Work and lunch schedules;

Optum is responsible for adhering to all applicable state and/or federal laws governing activities within the scope of this policy, including the Mental Health Parity and Addiction Equity Act (MHPAEA) and the Health Insurance Portability and Accountability Act (HIPAA) privacy requirements, as well as the applicable requirements, standards and regulations as set forth by the Employee Retirement Income Security Act (ERISA), the Center for Medicare and Medicaid Services (CMS), the Department of Labor (DoL), and any applicable accrediting organizations.

- 2.1.6. Payroll processes;
- 2.1.7. Safety;
- 2.1.8. Disaster preparedness; and
- 2.1.9. Fraud, Waste and Abuse.

3. Clinical Staff Training

- 3.1. Optum Pierce BHO provides an intensive six-week schedule of training and orientation for its entire clinical staff. This includes formal training sessions, self-paced work, and observation and practice sessions. Information is presented through in-person group sessions, on-line training, and individual supervision.
- 3.2. Optum Pierce BHO invites presenters from behavioral health care provider organizations (Pierce County and BHA representatives), state agencies, local consumer and family organizations (e.g., Rose House, A Common Voice, Tacoma Area Coalition for Individuals with Disabilities (TACID), and recovery support groups as well as corporate Optum staff, Optum Pierce BHO staff, and other expert consultants to be part of the teaching and training team. Washington State materials and resources from agencies such as the DSHS, the Washington Institute on Mental Health Research and Training, ATTC, and The Change Companies (ASAM), and DSM 5 diagnostic criteria are integrated into the training process.
 - 3.2.1. Initial orientation includes: An overview of the Washington State BHO system with focus on Pierce County;
 - 3.2.2. An introduction to the Pierce County behavioral health delivery system, including its historical evolution, best practice models, treatment philosophies, and future vision, with an overview of:
 - 3.2.2.1. Behavioral health care providers in Pierce County;
 - 3.2.2.2. Local recovery and family organizations; and
 - 3.2.2.3. Local advocacy agencies.
 - 3.2.3. An introduction to the philosophy of “recovery and resiliency” and how it is operationalized at Optum Pierce BHO;
 - 3.2.4. The need for cultural competency, diversity in the Optum Pierce BHO service area and specialty programs and services (presented partially by individuals in services and family members);
 - 3.2.5. A review of the characteristics of a system of care and the role, approach and priorities of Optum Pierce BHO in strengthening an integrated local delivery system in Pierce County among allied systems of care and Health Plans, including its relationship with the Puyallup tribe;
 - 3.2.6. Care Management functions
 - 3.2.6.1. Access;
 - 3.2.6.2. Referrals;
 - 3.2.6.3. Care coordination for adults, children and older adults;
 - 3.2.6.4. Resource management; and
 - 3.2.6.5. Risk management.
 - 3.2.7. Utilization Management
 - 3.2.7.1. Access to Care standards;
 - 3.2.7.2. Level of Care Guidelines;

- 3.2.7.3. Clinical Practice Guidelines,
- 3.2.7.4. Discharge planning and guidelines; and
- 3.2.7.5. Authorization processes by level of care.
- 3.2.8. Involuntary hospitalizations
 - 3.2.8.1. Legal requirements;
 - 3.2.8.2. Local and statewide inpatient options; and
 - 3.2.8.3. Designated Mental Health Professionals.
- 3.2.9. The Quality Assurance/Performance Improvement Plan
 - 3.2.9.1. Continuous quality improvement;
 - 3.2.9.2. Performance standards;
 - 3.2.9.3. Tracking of performance;
 - 3.2.9.4. Committees and monitoring; and
 - 3.2.9.5. Performance improvement projects.
- 3.2.10. Confidentiality
 - 3.2.10.1. Protected Health Information (PHI);
 - 3.2.10.2. HIPAA standards; and
 - 3.2.10.3. 42 CFR Part 2.
- 3.2.11. The Management Information System (MIS)
 - 3.2.11.1. Documentation standards;
 - 3.2.11.2. System capabilities; and
 - 3.2.11.3. System security.
- 3.2.12. Compliance and Fraud and Abuse
 - 3.2.12.1. Internal controls and monitoring activities including, but not limited to, the following modules:
 - 3.2.12.1.1. Lesson 1: *"Integrity and Compliance Program Overview"*;
 - 3.2.12.1.2. Lesson 2: *"Privacy Overview"*;
 - 3.2.12.1.3. Lesson 3: *"Protecting Company Intellectual Property"*;
 - 3.2.12.1.4. Lesson 4: *"Records and Information Management"*;
 - 3.2.12.1.5. Lesson 5: *"Information Security"*;
 - 3.2.12.1.6. Lesson 6: *"Whistle Blowers"*;
 - 3.2.12.1.7. Lesson 7: *"Conflicts of Interest"*;
 - 3.2.12.1.8. Lesson 8: *"Foreign Corrupt Practices Act (FCPA)"*; and
 - 3.2.12.1.9. Lesson 9: *"Handling Sensitive Data and Electronic Media."*
- 3.2.13. Individual-driven as well as Individual-run services;
- 3.2.14. Peer and family support services:
 - 3.2.14.1 The role of the Recovery and Resiliency Unit; and

3.2.14.2 Expansion of Peer Support Services throughout the system through training and development.

3.2.15. Optum Pierce BHO Ombuds Services;

3.2.16. Mandatory reporting;

3.2.17. Individual rights and responsibilities, including Advance Directives;

3.2.18. The Grievance System

3.2.18.1. Grievance acceptance, resolution tracking and documentation;

3.2.18.2. Denials, issuing notices of adverse benefit determination, appeals and related timeframes;

3.2.18.3. Peer Reviewers;

3.2.18.4. Roles of clinical staff; and

3.2.18.5. The Recovery and Resiliency Unit.

3.2.19. Evidence-Based and Promising Emerging Practices:

3.2.19.1 Modalities currently used by the Optum Pierce BHO's contracted behavioral health care providers; and

3.2.19.2 Behavioral health care providers' roles in identifying need for additional modalities.

3.2.20. Policies and Procedures;

3.2.21. Local resources in support of Recovery and Resiliency and how to access them;

3.2.22. Supportive Housing and Supported Employment; and

3.2.23. The following topics, specific to the successful completion of care coordination duties:

3.2.23.1. EPSDT;

3.2.23.2. Individuals at high risk;

3.2.23.3. Coordination with Healthy Options plans and PCPs;

3.2.23.4. ER utilization

3.2.23.5. Harm reduction

3.2.23.6. Medication assisted treatment

3.2.23.7. Engagement and retention

3.2.23.8. Special Populations

3.2.23.9. Recovery and Resiliency Unit Functions

3.2.23.10. Systems of care and care coordination

3.2.23.11. Comprehensive service planning

3.2.23.12. Consumer and family engagement

3.2.23.13. Wraparound child/family teams

3.2.23.14. Wellness Recovery Action Plans and consumer directed care; and

3.2.23.15. Consumer operated and consumer owned businesses.

4. Non-Clinical Staff Training

- 4.1. Training for non-clinical staff includes many of the same topics as clinical staff training, but from a less clinical perspective and customized to the administrative role that non-clinical personnel perform at the Optum Pierce BHO.
- 4.2. Training includes:
 - 4.2.1. An overview of the Washington State BHO system with focus on Pierce County;
 - 4.2.2. An introduction to the Pierce County behavioral health delivery system, including its historical evolution and future vision, with an overview of:
 - 4.2.2.1 Behavioral health care providers in Pierce County;
 - 4.2.2.2 Local consumer and family organizations; and
 - 4.2.2.3 Local advocacy agencies.
 - 4.2.3. An introduction to the philosophy of “recovery and resiliency” and how it is operationalized at Optum Pierce BHO;
 - 4.2.4. The need for cultural competency, diversity in the Optum Pierce BHO service area and specialty programs and services (presented partially by consumers and family members);
 - 4.2.5. A review of the characteristics of a system of care and the role, approach and priorities of Optum Pierce BHO in strengthening an integrated local delivery system in Pierce County among allied systems of care and Health Plans, including its relationship with the Puyallup tribe;
 - 4.2.6. Care Management functions
 - 4.2.6.1 Access;
 - 4.2.6.2 Referrals;
 - 4.2.6.3 Care coordination for adults, children and older adults;
 - 4.2.6.4 Resource management; and
 - 4.2.6.5 Risk management.
 - 4.2.7. Utilization Management
 - 4.2.7.1 Access to Care standards;
 - 4.2.7.2 Level of Care Guidelines;
 - 4.2.7.3 Clinical Practice Guidelines,
 - 4.2.7.4 Discharge planning and guidelines; and
 - 4.2.7.5 Authorization processes by level of care.
 - 4.2.8. Involuntary hospitalizations;
 - 4.2.9. The Quality Assurance/Performance Improvement Plan
 - 4.2.9.1 Continuous quality improvement;
 - 4.2.9.2 Performance standards;
 - 4.2.9.3 Tracking of performance;
 - 4.2.9.4 Committees and monitoring; and
 - 4.2.9.5 Performance improvement projects.
 - 4.2.10. Confidentiality
 - 4.2.10.1. Protected Health Information (PHI)

- 4.2.10.2.HIPPA standards
- 4.2.11. The Management Information System (MIS)
 - 4.2.11.1. Documentation standards
 - 4.2.11.1.2. System capabilities; and
 - 4.2.11.1.3. System security.
- 4.2.12. Compliance, fraud and abuse
 - 4.2.12.1. Internal controls and monitoring activities;
- 4.2.13. Consumer-driven as well as consumer-run services;
- 4.2.14. Peer recovery support and family support services:
 - 4.2.14.1. The role of the Recovery and Resiliency Unit; and
 - 4.2.14.2. Expansion of Peer Support Services throughout the system through training and development.
- 4.2.15. Optum Pierce BHO Ombuds Services;
- 4.2.16. Client rights and responsibilities, including Advance Directives;
- 4.2.17. The Grievance System
 - 4.2.17.1. Grievance acceptance, resolution, tracking and documentation;
 - 4.2.17.2. Denials, issuing notices of adverse benefit determination, appeals and related timeframes;
 - 4.2.17.3. Peer Reviewers;
 - 4.2.17.4. Roles of clinical staff; and
 - 4.2.17.5. The Recovery and Resiliency Unit.
- 4.2.18. Evidence-Based and Promising Emerging Practices;
- 4.2.19. Policies and Procedures;
- 4.2.20. Local resources in support of Recovery and Resiliency and how to access them; and
- 4.2.21. Supportive Housing and Supported Employment.

5.

- 5.1. Documentation of all completed training is included in each employee's file
- 5.2. The Executive Administration and QA/PI Unit staff work jointly to track and monitor internal trainings and request proof of trainings, and add the documentation to the personnel files.

Related Policies, Procedures and Materials

- Pierce Behavioral Health Organization policy: AD-06 - *Screening and Hiring of Employees*
- Pierce Behavioral Health Organization policy: AD-13 - *Provider Training*

Attachments

N/A

Approval History

- Policy created and effective: 09/2009
- Policy and Procedure Committee review and approval: 10/26/2009
- Policy and Procedure Committee review and approval: 08/23/2010
- Policy and Procedure Committee review and approval: 09/26/2011
- Policy and Procedure Committee review and approval: 08/27/2012
- Policy and Procedure Committee review and approval: 12/02/2013
- Policy and Procedure Committee review and approval: 09/22/2014
- Policy and Procedure Committee review and approval: 09/28/2015
- Policy and Procedure Committee review and approval: 02/24/2016
- Operational Procedures and Standards Committee Reviewed and Accepted: 01/25/2017
- Optum Pierce BHO reviewed and accepted: 02/2018